


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P93000038497 1. Entity Name Master Auto Mechanics, Inc.	
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FILED

03 OCT 10 PM 3:52

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 6201 Pembroke Rd Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Hollywood, Fl.	City & State
Zip 33020	Country US

4. FEI Number 65-0413866	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name Jose A Colon	
Street Address (P.O. Box Number is Not Acceptable) 6201 Pembroke Rd	
City Hollywood	Zip Code FL 33020

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE President 02/06/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	R Jose A Colon 12363 NW 13th Ct., Pembroke Pines, Fl. 33026
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other individuals empowered.

SIGNATURE: President 02/06/03 954-985-2552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

2/10/10

October 7th, 2003

**State of Florida Div of Corp
PO Box 6327
Tallahassee, Fl. 32314**

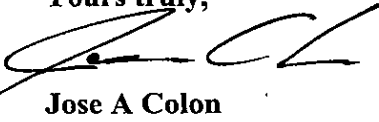
**RE: P93000038497
Master Auto Mechanics, Inc**

To whom it may concern:

Please be advised by this letter that we back in February 6th 2003 we sent a blank renewal form for our corporation, since we had to reinstate in January we did not receive a pre printed form, our check was never cashed and we placed a stop payment and we are sending a new check along with a copy of the report we filed. Please update your records accordingly.

Thank you in advance for your cooperation.

Yours truly,

A handwritten signature in black ink, appearing to read "Jose A Colon", written over a horizontal line.

**Jose A Colon
President**